

BOROUGH OF COOPERSBURG
PROPERTY INSPECTION FORM
(REQUIRED UPON TRANSFER OF PROPERTY – Ordinance 675)

DATE: _____ TIME-IN: _____ TIME-OUT: _____

REGISTERED PLUMBER: _____

A. GENERAL PROPERTY INFORMATION

ADDRESS: _____ RESIDENTIAL: YES ___ NO ___

OWNER: _____ OWNER'S PHONE: _____

B. INTERNAL HOUSE INSPECTION

DOES HOUSE HAVE BASEMENT? YES ___ NO ___
EVIDENCE OF WATER ENTERING BASEMENT? YES ___ NO ___

IF YES, DESCRIBE: _____

TYPE OF BASEMENT FLOOR: _____

1. SUMP PUMP INFORMATION (IF APPLICABLE)

DOES BASEMENT HAVE SUMP PUMP? YES ___ NO ___
DISCHARGE LOCATION: _____

IS SUMP PUMP HARD PIPED TO OUTSIDE? YES ___ NO ___
IF NO, DESCRIBE: _____

DESCRIBE ALL CONNECTIONS TO SUMP PIT: _____

2. FLOOR DRAIN INFORMATION

DOES HOUSE HAVE FLOOR DRAIN(S)? YES ___ NO ___
IS THE FLOOR DRAIN(S) PUNCTURED? YES ___ NO ___

DISCHARGE LOCATION (IF KNOWN): _____

3. FOUNDATION DRAIN INFORMATION

DOES HOUSE HAVE INTERNAL FOUNDATION DRAIN CONNECTION? YES ___ NO ___

DISCHARGE LOCATION (IF KNOWN): _____

4. SEWER CONNECTION CLEANOUT/TRAP

IS THERE AN INTERNAL SEWER CONNECTION TRAP/CLEANOUT? YES ___ NO ___
IS CLEANOUT SEALED? YES ___ NO ___

ELEVATION OF SEWER TRAP/CLEANOUT RELATIVE TO BASEMENT FLOOR:
ABOVE: ___ BELOW: ___ FLUSH: _____

5. OTHER POTENTIAL INFLOW SOURCES?

- C. EXTERNAL HOUSE INSPECTION: FOR EACH OF THE POTENTIAL INFLOW SOURCES BELOW, INDICATE PRESENCE (YES/NO) AND ULTIMATE DISCHARGE LOCATION, IF FOUND (STREET, YARD, UNKNOWN, ETC.):

ULTIMATE DISCHARGE LOCATION

- | | |
|---|--------------|
| 1. ROOF DOWNSPOUTS THAT ENTER THE GROUND? | YES___ NO___ |
| 2. GARAGE DRAINS? | YES___ NO___ |
| 3. DRIVEWAY DRAINS? | YES___ NO___ |
| 4. YARD DRAINS? | YES___ NO___ |
| 5. WINDOW WELL DRAINS? | YES___ NO___ |
| 6. EXTERIOR STAIRWAY DRAINS? | YES___ NO___ |
| 7. OTHER STORMWATER DRAINS? | YES___ NO___ |

- D. ATTACH SKETCH PLAN OF ALL POTENTIAL INFLOW SOURCES: (INDICATE LOCATION OF ALL CONNECTED SOURCES)

- E. SEWER LATERAL INSPECTION:

VIDEO INSPECTION COMPLETED? (HOUSE TO MAIN) YES___ NO___

LATERAL PIPE MATERIAL

1. STRUCTURAL DAMAGE (CRACKS, HOLES, DEFORMATION, COLLAPSE, OFFSET JOINTS, ETC.)?
YES___ NO___

IF YES, DESCRIBE:

- | | |
|--|--------------|
| 2. ACTIVE INFILTRATION OBSERVED? | YES___ NO___ |
| 3. ROOT INTRUSION OBSERVED? | YES___ NO___ |
| 4. DEPOSITS (>10% OF PIPE DIAM.) OBSERVED? | YES___ NO___ |
| 5. STANDING WATER (>25% OF PIPE DIAM.) OBSERVED? | YES___ NO___ |

REMARKS:

- F. INSPECTOR CERTIFICATION

THE UNDERSIGNED HEREBY AFFIRMS THAT THE FOREGOING INFORMATION IS TRUE AND CORRECT TO THE BEST OF SAID PERSON'S KNOWLEDGE, INFORMATION, AND BELIEF; SAID AFFIRMATION BEING MADE SUBJECT TO THE PENALTIES PRESCRIBED BY 18 PA C.S. §4904 (UNSWORN FALSIFICATION TO AUTHORITIES).

SIGNATURE:_____ DATE: _____

PLEASE RETURN THIS TO THE BOROUGH OFFICE: 5 N MAIN ST. COOPERSBURG PA 18036

610-282-3307 (PHONE)

610-282-4668 (FAX)

MAIL@COOPERSBURGBOROUGH.ORG